	M	JLTIPI	E DEP	ENDEN	TCLA	IM	SERIAL	NO.		·	CIL INC.			
MULTIPLE DEPENDENT CLAIM FEE CALC*** ATION SHEET								SERIAL NO. FILING DATE						
(FOR USE \ H FORM PTO-875)								101563265 APPLICANT(S,						
							CLAIMS							
	ASE	ell ED	AF	TER	AF	TER	DAINIS		A EVIDE					
ľ	AS FILED		I*AMENDMENT .		2 [™] AMENDMENT		1	AS F	AS FILED		AFTER		AFTER 1 MAMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.			IND.	DEP.	
1 2	 	 	<u> </u>				51					AND.	DEP.	
3			1				52 53	- 	ļ					
4	ļ						54		 		 -			
5	 		 				55						 	
7		,					56 57		·					
8	<u> </u>						58		 				 	
10							59							
11							60 61			·		-		
12							62						 	
13	 						63							
15					·		64							
16 17	·						66							
18	 						67							
19							68 69							
20							70							
22	 	 ,					71							
23							72 73							
24 25							74.							
26		•					75 76	-						
27							77	1					2	
28 29							78							
30							79 80							
31							81							
32 33							82	-						
34							83 84							
35							85						<u> </u>	
36 37						<u>-</u> -	86	-						
38						· · ·	87 88	1						
39.							89.							
40 41 ·	 						90 91	-						
42							91	1						
43							93							
44					<u> </u>		94	1						
46							96	 						
47							97							
48 49							98	 						
50						·	100	 						
TOTAL IND.	2	1		4		1	TOTAL INC		I		1			
TOTAL DEP	9	_		<u>.</u>		_		 	_		*		_	
TOTAL			74				TOTAL DEI	 		la la	2			
CLAIMS	11.						CLAIMS	<u></u>						
PTO - 1360	(REV. 11/04)	-							U.S. DEPART Patent and Tri					